B 5 (Official Form 5) (12/07)

UNITED STATES BANKRUPTCY COURT			INVOLUNTARY		
District of Oregon			PETITION		
IN RE (Name of Debtor – If Individual: Last, First, Middle)			ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.) none known		
Dr. Bott LLC		none known			
Last four digits of Social-Security or other Individual's Tax-I.D. No./Complete EIN (If more than one, state all.): 93-1267743					
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code)		MAILING ADDRE	MAILING ADDRESS OF DEBTOR (If different from street address)		
9730 SW Hillman Ct, Ste 600 Wilsonville, OR 97070 COUNTY OF RESIDENCE OR PRINCIPAL PLACE	E OF RUSINESS	Attn: Gary I. G 121 SW Morris	c/o Garvey Schubert Barer Attn: Gary I. Grenley 121 SW Morrison St, 11th Floor Portland OR 97204		
Clackamas Co.	ZIP CO				
	97070		ZIP CODE 97204		
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses) Same as Street Address of Debtor CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED					
☐ Chapter 7 ✓ Chapter 11					
INFOR	MATION REGARDING I	DEBTOR (Check applicable	le boxes)		
Nature of Debts (Check one box.) Petitioners believe:	Type of Debtor (Form of Organization) □ Individual (Includes Joint Debtor)		Nature of Business (Check one box.) Health Care Business Single Asset Real Estate as defined in		
☐ Debts are primarily consumer debts	✓ Corporation (Includes LLC and LLP)□ Partnership		11 U.S.C. § 101(51)(B) Railroad		
Debts are primarily business debts	Other (If debtor is not one of the above entities, check this box and state type of entity below.)		 □ Stockbroker □ Commodity Broker □ Clearing Bank ✔ Other 		
VENUE			FILING FEE (Check one box)		
place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. [I] A bankruptcy case concerning debtor's affiliate, general		specified in § 304(g) of [If a child support credite	Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. To child support creditor or its representative is a petitioner, and if the itioner files the form specified in § 304(g) of the Bankruptcy Reform Act of		
PENDING BANKRU OR AFFILIATE OF THIS DEI	JPTCY CASE FILED BY G BTOR (Report information f				
Name of Debtor	Case Number		Date		
Relationship	District		Judge		
ALLEGATIONS (Check applicable boxes)			COURT USE ONLY		
 Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b). The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code. The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; 					
or b. Within 120 days preceding the filing of this petition, a custodian, other than a trustee receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.					

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Name of Debtor Dr. Bott LLC

Case No._see above

	TRANSFER O	F CLAIM		
	n a transfer of any claim against th tatements that are required under I	ne debtor by or to any petitioner.	Attach all documents that	
	REQUEST FO	R RELIEF		
	relief be entered against the debtor und representative appointed in a foreign p			
Petitioner(s) declare under penalty of correct according to the best of their k				
x /s/ Bart Thielen (CFO/COO)		x_/s/ Justin D. Leonard	04/30/2014	
Signature of Petitioner or Representative (State title) Baltic Latvian Universal Electronics, LLC 04/30/2014		Signature of Attorney Date McKittrick Leonard LLP		
Name of Petitioner dba Blue Microphones Date Signed		Name of Attorney Firm (If any) 111 SW Columbia, Ste 1100, Portland, OR 97201		
Name & Mailing Address of Individual	Attn: Bart Thielen 5706 Corsa Ave. Ste. 102	Address (971) 634-0192		
Signing in Representative Capacity	Westlake Village, CA 91362	Telephone No.		
x /s/ Igor Duc (Managing Director)		x /s/ Justin D. Leonard 04/30/2014		
Signature of Petitioner or Representative (State title) Design Pool Limited dba Native Union 04/30/2014		Signature of Attorney Date McKittrick Leonard LLP		
Name of Petitioner	Date Signed	Name of Attorney Firm (If any) 111 SW Columbia, Ste 110	00. Portland. OR 97201	
Name & Mailing	Attn: Igor Duc Room 4-5	Address	50,1 5	
Address of Individual Signing in Representative	21F Nam Wo Hong Bldg	(971) 634-0192 Telephone No.		
Capacity	148 Wing Lok St	rereptione No.		
	Sheung Wan, Hong Kong			
x /s/ Noah Rasheta (CEO)		x_ /s/ Justin D. Leonard 04/30/2014		
Signature of Petitioner or Representati iStabilizer, LLC	04/28/2014	Signature of Attorney Date McKittrick Leonard LLP		
Name of Petitioner	Date Signed	Name of Attorney Firm (If any) 111 SW Columbia, Ste 1100, Portland, OR 97201		
Name & Mailing Address of Individual	Attn: Noah Rasheta	Address (971) 634-0192		
Signing in Representative	5 <u>S Main Street</u> Kamas, UT 84036	Telephone No.		
Capacity	<u> </u>			
	PETITIONING (CDEDITORS		
Name and Address of Petitioner	ILILIONATO	Nature of Claim	Amount of Claim	
Baltic Latvian Univ. Electrs., LL	C dba Blue Microphones	account payable	460,025.43	
Name and Address of Petitioner		Nature of Claim	Amount of Claim	
Design Pool Limited dba Native Union		account payable	267,268.55	
Name and Address of Petitioner		Nature of Claim	Amount of Claim	
iStabilizer, LLC		account payable	60,257.66	
	e petitioners, attach additional sheets watitioner's signature under the statemer		Total Amount of Petitioners'	
	formation in the format above.	it and the name of accorney	886,750.47	

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Name of Debtor_ Dr. Bott LLC

Case No._see above

	s been a transfer of any claim agains any statements that are required und		oner. Attach all documents that		
	REQUEST 1 er for relief be entered against the debtor preign representative appointed in a forei				
	lty of perjury that the foregoing is true an their knowledge, information, and belief.				
x /s/ Edward W. Martin (CEO)		x /s/ Justin D. Leonard	04/30/2014		
Signature of Petitioner or Repre MarBlue		Signature of Attorney McKittrick Leonard LLF	Date		
Name of Petitioner	Date Signed	Name of Attorney Firm (If any) 111 SW Columbia, Ste 1100, Portland, OR 97201			
Name & Mailing Address of Individual Signing in Representative Capacity	Edward W. Martin 283 N. Bryan Rd. Dania Beach, FL 33004	Address (971) 634-0192 Telephone No.			
x	esentative (State title)	xSignature of Attorney	Date		
Name of Petitioner	Date Signed	Name of Attorney Firm (If a	ny)		
Name & Mailing Address of Individual Signing in Representative Capacity		Address Telephone No.			
x_ Signature of Petitioner or Repre	esentative (State title)	x_ Signature of Attorney	Date		
Name of Petitioner	Date Signed	Name of Attorney Firm (If any)			
Name & Mailing Address of Individual		Address	Address		
Signing in Representative Capacity		Telephone No.			
	DETITIONIN	G CREDITORS			
Name and Address of Petitioner		Nature of Claim	Amount of Claim		
MarBlue, 283 N. Bryan Ro	d., Dania Beach, FL 33004	account payable	99,198.83		
Name and Address of Petitioner	•	Nature of Claim	Amount of Claim		
Name and Address of Petitioner	:	Nature of Claim	Amount of Claim		
penalty of perjury, ea	n three petitioners, attach additional shee ach petitioner's signature under the states for information in the format above		Total Amount of Petitioners' Claims 886,750.47		